FOR INSTRUCTIONS, SEE BACK OF FORM		FORM	STATEMENT
CHECK ONE:		DR-1	OF
This is an initial* Statement of Organization	Reset Form	(Rev. 8/2011)	ORGANIZATION
I his is an amended. Statement of Organization		For Office Use Only 14073	
Statement must be filed within 10 days of committee accepting contribution	ns, making expenditures, or	Comm. # 190 7.3	
ncurring debts exceeding \$750. Amendments must be filed within 30 days iffective January 1, 2011, ONLY county/local committees with less than \$2	of a change.	Indexed	
using these forms. All other committees must file their statements and reports electronically.		Audited Computer	
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Esse For	DES MOINES		
MPORTANT: Indicate type of committee you are reporting for:		****	2
Statewide/Legislative/Judge Standing for Retention Candidate (2 5) County Candidate (6) City Candidate (7) School Board or Other I)Statewide PAC (3)State Party (4) County Central Co	ommittee ==
10)School Board or Other Political Subdivision PAC (11) Ballot Iss	Control Subdivision Candidate(8	n multiple city/cour	City PAC——
DMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (mane	datory except for a	andidate's committee)
MS. CLAIRE M. COUTURE	Name ↓ ↓		_ 7
alling Address 2040 COTTAGE GROVE AVE APT 2	Mailing Address ↓ ↓	`	(字)
ty, State 1 Zip Code 1 50311-4150	City, State ↓ ↓ Zip Code ↓ ↓	ļ	10=
none (515) 707 - 0269	Phone ()		3
MAIL CLATLEMOUTURE & GMAIL. COM	e-Mail		
	vocate for/against candidate(s)	dvocate for ballot iss	ue(s)
Comment or description:		dvocate against ball	ot issue(s)
I Candidates Enter: Des Moines City Council At-	Large County/Local Candidates	and Ballot Issue Co	nmittees Enter:
ince sought. <u>PESTIDINES CITY COUNCIL</u>	County: POLK	_	
olitical Party (if applicable) Democrat	(If active in multiple ballot iss		ist of counties
strict:			
ear Standing for Election:	Date of Election:	0-11	
ank Account Name (must match committee name)	Candidate name & Address or F	Parent Entity (PACs	if applicable)
 ·		Affiliate, or Sponsor	
ESSE FOR DES MOINES	LOREN C		
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Liberty Bank, Small Business	1348 42.	STREE	7
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		ES IA	50311-2529
4018 University Avenue	DES MOIN		
ty ↓ ↓ State ↓ ↓ Zip ↓ ↓	DES MOIN Phone (515) 343-		
HOIS University Avenue ty State Des Moines IA 50311	Phone (515) 343-	6135	lobal. net
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Des Moines IA 50311	Phone (515) 343- e-Mail 10ren esse 8	6135	lobal. net
TATEMENT OF AFFIRMATION: By filing this document the committee affi	Phone (515) 343- e-Mail Joren 2552 8	6135 50 @sbcg	
TATEMENT OF AFFIRMATION: By filing this document the committee affi	Phone (515) 343- e-Mail Joren 2552 8	6135 50 @sbcg	
ity ↓ ↓ State ↓ ↓ Zip ↓ ↓	Phone (515) 343- e-Mail /oren esse 8 rms the following: I they are subject to the laws in lowa Co	6135 50 @ s bcg ode chapters 68A and onese reports on or before	68B and the administrativ

- materials except for those items exempted by statute or rule. A committee that wishes to register a committee name for purposes of using the shorter "paid for by" and does not intend to cross the \$750 filing threshold shall file the Form DR-SFA form in lieu of filing this form.
- 4. That lowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for ballot issue PACs.
- 5. A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.301 through 68A.303 and rule 351—4.25.
- 6. That the committee will continue to file discosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (IPR) has been filed.

Signature of Candidate, OR, for all other committees, Chairperson